| BEST AVASLABLE COPY | | | | | | | | | | | | | |
|--|--|---|------------------------------|--------------------------------|--------------|------------------|---------------------------------------|------------------------------|------------------------|---------|-------------------------------|------------------------|--|
| | | | | | | | | Application or Docket Number | | | | | |
| | PATENT A | 10046634 | | | | | | | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN OR SMALL ENTITY | | |
| TC | TAL CLAIMS | | 9 | | | | F | RATE F | | 1 | RATE | FEE | |
| FOR | | | NUMBER FILEO | | NUMBER EXTRA | | BAS | UC FEE | 370.00 | OR | BASIC FEE | 740.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 9 minus 20= | | • 4- | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | \$ 9= | | OR | X\$18= | 1 | |
| INDEPENDENT CLAIMS | | | mi M | nus 3 = | ٠ ـــ | <u> </u> | 7 | (42= | | OR | X84= | | |
| MULTIPLE DEPENDENT CLAIMP | | | RESENT | | | -14 | | 140= | | OR | +280= | 1 | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | T | TOTAL | | OR | TOTAL | 740 | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | MALL | ENTITY | OR | OTHER SMALL | | |
| ENT A | | CLAIMS REMAINING AFTER AMENDMENT | • | HIGH NUM PREVK PAID | BER OUSLY | PRESENT EXTRA | F | ATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| AMENDMENT | Total | • 4 | Minus | 9 | : | | X | \$ 9= | | OR | X\$18= | | |
| AME | Independent | • '] | Minus | *** 12 | 2 | = | × | 42= | | OR | X84= | | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | 140= | | OR | +280= | | |
| ŀ | | | | | | | | | | OR | TOTAL ADDIT, FEE | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIĞI- NUM PREVII PAID | BER | PRESENT EXTRA | P | ATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Š | Total | | Minus | ** | | 3 | × | \$ 9= | | OR | X\$18= | | |
| AME | Independent + FIRST PRESENTATION OF MI | | Minus *** ILTIPLE DEPENDENT | | CLAIM | CLAIM | | 42= | | OR | X84= | • | |
| The state of the s | | | | | | | | 140= | | OR | +280= | | |
| | | | | | | | ADD | TOTAL ADDIT. FEE | | OR | YOTAL ADDIT. FEE | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | |
| AMENDMENT C | . • | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVI PAID | BER OUSLY | PRESENT EXTRA | R | ATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | ** | | - | ΙŒ | \$ 9= | | OR | X\$18= | | |
| ĮĮ. | Independent | * | Minus | *** | | • | l 🗔 | 42= | | OR | X84= | | |
| الـُ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | OR | +280= | _ | |
| - | If the "Highest Nu | mber Previously Paraber Previously P | aid For IN THI | S SPACE | is less tha | n 20, enter "20. | ADD | IT. FEE | | OR | ADDIT. FEE | L | |
| Ι. | The "Highest Num | ber Previously Pa | id For" (Total o | r independ | ient) is the | highest numbe | er found i | n the ap | propriate bo | x in co | lumn 1. | | |

United States Patent and Trademark Office
- Sales Receipt -

01/13/2006 AFREEMAN 00000001 500238 10046634 Sale Ref: 00000001 DA#: 500238 10046634 01 FC:1252 450.00 DA Appl. No. 10/046,634
Amendment and/or Reply
to the Office Action of 4 August 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.: 10/046,634

Applicant(s): A.C. Den Brinker, et al.

Filed: January 14, 2002

TC/A.U.: 2600/2654

Examiner: V. Paul Harper

Atty. Docket: NL 010450

Title: Linking In Parametric Encoding

Page 1 of 14

CERTIFICATE OF MAILING OR TRANSMISSION

I certify that this correspondence is being:

[] deposited with the U.S. Postal Service with sufficient postage as first-class mall in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

[X] transmitted by fecsimile to the U.S. Patent and Trademark Office at (571)273-8300.

On: 4 January 2006

Ву:

RECEIVED
CENTRAL FAX CENTER

JAN 0 4 2006

AMENDMENT and/or REPLY under 37 C.F.R. § 1.111

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

PAGE 01/14

In response to the non-final Office action dated August 4, 2005, please amend the above referenced application as follows and reconsider the application in light of the following remarks.

Atty. Docket No. NL 010450

01/04/2006 21:41 6103758380 VOLENTINE FRANCOS

Page 13 of 14

Appl. No. 10/046,634 Amendment and/or Reply to the Office Action of 4 August 2005

is not clearly articulated in the Office Action how the table of page 6 of the reference to Tairo, et al. relates to the calculating unit of claim 1.

Moreover, in the rejection of claim 8, the Office Action relies on page 5, line 10 through page 7, line 10 of Tairo, et al. for the disclosure of a sinusoidal estimating unit. However, one is left to wonder what element of the disclosure of Tairo, et al. is the sinusoidal estimating unit.

Respectfully, Applicants have paid the appropriate claim fees for this application. Applicants are entitled to a full and complete examination of each and every pending claim, including all features recited therein. If the Examiner cannot cite prior art taken alone or in combination which would have produced the linking unit, parametric encoder and method of claims 1,2,8 and 9, then Applicants respectfully submit that they are entitled to an allowance of their claims as a matter of law. Accordingly, the Examiner is respectfully requested to cite something in the prior art disclosing the device including all of the features recited in the various claims 1, 2, 8 and 9 or else allow Applicants' claims.

III. Conclusion

In view of the foregoing, applicant(s) respectfully request(s) that the Examiner withdraw the objection(s) and/or rejection(s) of record, allow all the pending claims, and find the application in condition for allowance. If any points remain in issue that may best be resolved through a personal or telephonic interview, the Examiner is respectfully requested to contact the undersigned at the telephone number listed below.

If necessary, the Commissioner is hereby authorized in this, concurrent, and further replies to charge payment or credit any overpayment to Deposit Account Number 50-0238 for any additional fees, including, but not limited to, the fees under 37 C.F.R. §1.16 or under 37 C.F.R. §1.17.

Atty. Docket No. NL 010450

BOCE 1 1/14 . BCAD V1 4W15008 8:58:21 LM [EFSEED STEWGREQ 11MG] . 8AS:108140-6114MB-6159 . DMIS:31.28200 . CEID:9103192308 . DRISY110M (MIN-92):04-54

Page 14 of 14

Appl. No. 10/046,634 Amendment and/or Reply to the Office Action of 4 August 2005

Respectfully submitted,

William S. Francos, Esq.

Reg. 38,456

January 4, 2006
Volentine, Francos & Whitt, PLLC
Treeview Corporate Center
Two Meridian Boulevard
Wyomissing, PA 19608

(610) 375-3513

Atty. Docket No. NL 010450